MDMA - ECSTASY

Use

The first measurement of ecstasy use among the general adult population of Toronto was conducted by the Centre for Addiction and Mental Health in 2000. In 2003, less than 1% of Toronto adults reported using ecstasy in the past year. This rate is non-significantly lower than those found in previous surveys, when it was about 2%.

In 2003, past year use of ecstasy was reported by 3% of Toronto students. This rate is non-significantly lower than that found in 2001 (6%), but resembles the levels found in the mid-1990s

Despite the low level of ecstasy use reflected in these general surveys, studies at local dance parties as well as those at gay clubs in Toronto indicate ecstasy remains a drug of choice in these settings.[24,54]

Enforcement Data

Since 1997, when data collection on MDMA enforcement activity began, the peak in the number of seizures were in the year 2000 when 219 seizures occurred (14 kg seized) (data not tabled). Since that time, the number of MDMA seizures has declined somewhat, but the quantities seized have increased slightly. In 2003, there were 155 seizures and 16 kg was seized. MDMA accounted for 3% of the total number of drug seizures in 2003.

Police data suggest that the purity of MDMA on the streets of Toronto may also be increasing. The average purity level of MDMA seized in 1999 was found to be approximately 38% (based on 15 samples; data not presented). In 2000, the average purity was 82%, based on 6 samples; data not presented). The average level of MDMA hydrochloride in milligrams per tablet in 2000 was 112 mg, based on 28 samples.

Treatment Data

Inquiries regarding the treatment of MDMA-related problems are classified under the general category of Amphetamines by the Drug and Alcohol Registry of Treatment. As such, trends regarding treatment needs with respect to ecstasy cannot be distinguished from those of Amphetamines

Drug-Related Deaths

During the 3 year period between January 1, 1999 and December 31, 2001, there were 8 deaths in Toronto with positive findings for MDMA.

Four of these deaths occurred in 1999. Each of the four victims was male, ranging in age from teen-aged to 28 years old. In each case the death was ruled accidental. In one case, MDMA was lethal alone, in two cases it was part of a lethal combination, while in the fourth case the dose of MDMA was not considered lethal.

One MDMA death occurred in 2000. This was an accidental death resulting from a combination of MDMA and other drugs. The victim was a female, under twenty years of age.

In 2001, there were 3 deaths related to the use of MDMA. Two of the three decedents were male. The ages of the victims ranged from teen-age to 50 years old. Two of these deaths were accidental while the third was ruled a suicide. In two cases, MDMA was lethal alone, while in the third, it was not considered to be present at a lethal level.

> Since the end of the 1990s, designer drugs have increasingly gained in popularity. This interest was at first primarily related to the “Rave” phenomenon, and ecstasy was the substance most often consumed...[T]he National Integrated Training Committee on Chemical Drugs and All-Night Dance Parties for first responders held training workshops in Vancouver, Montreal, Ottawa and Toronto in 2002 and 2003 .It quickly became apparent that the consumption of ecstasy and its derivatives had by then spread to a far broader clientele than ravers.This means that these substances are just as often found in after-hour bars, at private parties, at high schools, colleges, and universities.
> **From – “Drug Analysis report on Designer Drugs seized in Ouebec.” Health Canada. 2004.**